

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail Box ISSUE FEE**  
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B  
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23349 7590 03/26/2003

**STATTLER JOHANSEN & ADELI**  
**P O BOX 51860**  
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I hereby certify that this Fee(s) Transmittal is being/deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

MANI ADELI	(Depositor's name)
6-26-03	(Signature)
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/048,000	01/13/2002	Steven Teig	SPLX.P0140	5313

**TITLE OF INVENTION:** METHOD AND APPARATUS FOR IDENTIFYING ROUTES FOR NETS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$300	\$1600	06/26/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
DINH, PAUL	2825	716-012000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

CADENCE DESIGN SYSTEMS, INC. SAN JOSE, CALIFORNIA

Please check the appropriate assignee category or categories (will not be printed on the patent)  individual  corporation or other private group entity  government

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4b. Payment of Fee(s):

Issue Fee

A check in the amount of the fee(s) is enclosed.

Publication Fee

Payment by credit card. Form PTO-2038, is attached. *any additional*

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6-26-03

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01 FC:1501	1300.00	OP
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